

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Allstate Insurance Company PAC

ADDRESS (number and street)

2775 Sanders Road Suite A2W

Check if different
than previously
reported. (ACC)

Northbrook

IL

60062

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00040253

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☒ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

11

08

2016

in the
State of

IL

(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

in the
State of

5. Covering Period

10

01

2016

through

10

19

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Merten, Jess, ,

Type or Print Name of Treasurer

Signature of Treasurer

Merten, Jess, ,

[Electronically Filed]

Date

10

27

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		54982.64
(b) Cash on Hand at Beginning of Reporting Period.....	30106.86	
(c) Total Receipts (from Line 19)	11842.68	255279.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	41949.54	310261.89
7. Total Disbursements (from Line 31).....	24618.36	292930.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	17331.18	17331.18
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	9		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	11418.23	187585.98
(ii) Unitemized	424.45	67033.27
(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶	11842.68	254619.25
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	11842.68	254619.25
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	160.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	11842.68	255279.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	11842.68	255279.25

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	118.36	1250.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	118.36	1250.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	14000.00	204100.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	10500.00	87580.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	24618.36	292930.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24618.36	292930.71

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	11842.68	254619.25
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11842.68	254619.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	118.36	1250.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	160.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	118.36	1090.71

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ABEL, REBECCA, A, ,

Mailing Address 657 CORAL COURT

City
LINDENHURSTState
ILZip Code
60046FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.78

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007884

Amount of Each Receipt this Period

26.18

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ADAMCZYK, VICTORIA, L, ,

Mailing Address 629 Sandy Lane

City
Flower MoundState
TXZip Code
75022FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

741.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007737

Amount of Each Receipt this Period

39.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. AGAR, MICHAEL, W, ,

Mailing Address 200 W MILL VALLEY DR

City
COLLEYVILLEState
TXZip Code
76034FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ATSV-Service Manager-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

353.64

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007820

Amount of Each Receipt this Period

16.84

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

82.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ALLEN, WESLEY, M, ,

Mailing Address 163 Hawthorne Court

City
Wyomissing

State
PA

Zip Code
19610

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Encp-Underwriting-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007844

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Anderson, Erik, V, ,

Mailing Address 8060 Ryland Drive

City
El Dorado Hills

State
CA

Zip Code
95762

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Mktg-Regional Field-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007966

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Arnberger, Nathan, , ,

Mailing Address 1200 Keim Trail

City
Bartlett

State
IL

Zip Code
60103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Ent Svc-Leader-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007941

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

74.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BAILEY, DENIS, , ,

Mailing Address 8316 E. Tailfeather Dr

City
ScottsdaleState
AZZip Code
85255FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

494.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007642

Amount of Each Receipt this Period

23.55

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BALATSOUKAS, ALEXANDRA, , ,

Mailing Address 1225 W. Morse Unit 508

City
ChicagoState
ILZip Code
60626FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

721.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007824

Amount of Each Receipt this Period

34.36

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BALLINGER, WILLIAM, P, ,

Mailing Address 61 Tournament Dr N

City
Hawthorn WoodsState
ILZip Code
60047FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-PO-Chief Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007692

Amount of Each Receipt this Period

58.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

115.91

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BANET, PHILLIP, W, ,

Mailing Address 1975 Merlot Ct

City
WheelingState
ILZip Code
60090FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
PIM-Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

921.90

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007722

Amount of Each Receipt this Period

43.90

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BECKER, ROBERT, K, ,

Mailing Address 5 Greensview Lane

City
Scotch PlainsState
NJZip Code
07076FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

643.23

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007658

Amount of Each Receipt this Period

30.63

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BELLAS, DIANE, , ,

Mailing Address 1402 N. Illinois Avenue

City
Arlington HeightsState
ILZip Code
60004FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
FSS-Accounting Research-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

489.51

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007758

Amount of Each Receipt this Period

23.31

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

97.84

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BERKOWICZ, WALTER, A, ,

Mailing Address 405 GATESHEAD DRIVE

City
NAPERVILLE

State
IL

Zip Code
60565

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ATSV-Architect-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

795.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007796

Amount of Each Receipt this Period

37.88

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BIRMAN, ROBERT, W, ,

Mailing Address 7533 WHITLOCK PLACE

City
LINCOLN

State
NE

Zip Code
68516

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AgentSvc-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

429.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007798

Amount of Each Receipt this Period

20.45

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BLADH, ERIC, W, ,

Mailing Address 2935 HACIENDA BLVD

City
HACIENDA HTS

State
CA

Zip Code
91745

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Lit Svcs Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007887

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOMBECK, SUSAN, F, ,

Mailing Address 506 Blackhawk Ct

City
LoomisState
CAZip Code
95650FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

353.85

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007885

Amount of Each Receipt this Period

16.85

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BORDER, DAVID, R, ,

Mailing Address 780 W KIMBALL AVENUE

City
PALATINEState
ILZip Code
60067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-EB-President ADS and

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007718

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BORST, WILLIAM, B, ,

Mailing Address 827 N. HADDOW AVENUE

City
ARLINGTON HTSState
ILZip Code
60004FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP-EB-Head of Strategic G

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

684.60

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007757

Amount of Each Receipt this Period

32.60

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

184.45

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWES, SHANNON, M, ,

Mailing Address 1913 Buckingham Road

City
MundeleinState
ILZip Code
60060FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP-PO-Alternative Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

945.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007633

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOWN, GWEN, K, ,

Mailing Address 5220 SAWGRASS DR.

City
LINCOLNState
NEZip Code
68526FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367.50

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007862

Amount of Each Receipt this Period

17.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRADLEY, LONDON, B, ,

Mailing Address 4561 Dodds Mills Drive

City
haymarketState
VAZip Code
20169FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

909.09

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007868

Amount of Each Receipt this Period

43.29

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

195.79

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRIGHT, DUDLEY, R, ,

Mailing Address 18135 W MEANDER DR

City
GRAYSLAKE

State
IL

Zip Code
60030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007686

Amount of Each Receipt this Period

21.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BROADFIELD, SHAWN, L, ,

Mailing Address 1044 APPLE BLOSSOM COURT

City
LAKE ZURICH

State
IL

Zip Code
60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-CLAIMS-Technical Execu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1166.97

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007762

Amount of Each Receipt this Period

55.57

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BROWN, PAMELA, S, ,

Mailing Address 5886 TEAL LANE

City
LONG GROVE

State
IL

Zip Code
60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Investment Attorney-T

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

454.23

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007816

Amount of Each Receipt this Period

21.63

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

99.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BUCKLEY, CHERI, M, ,

Mailing Address 215 5th Street

City
Libertyville

State
IL

Zip Code
60048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ATSV-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.07

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007813

Amount of Each Receipt this Period

13.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BUKOWY, MARK, L, ,

Mailing Address 1077 Devon Drive

City
Antioch

State
IL

Zip Code
60002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

359.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007760

Amount of Each Receipt this Period

17.10

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURNO, TYRONE, A, ,

Mailing Address 868 CHARLTON ROAD

City
LAKE VILLA

State
IL

Zip Code
60046

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
HR-Workforce Relations-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

379.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007682

Amount of Each Receipt this Period

18.05

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

48.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BURNS, GREGORY, C, ,

Mailing Address 2000 N. BROADMOOR LANE

City
VERNON HILLS

State
IL

Zip Code
60061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-ABO-Continuous Improv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1267.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007675

Amount of Each Receipt this Period

60.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Capuzzi, Michael, , ,

Mailing Address 2630 W. Winona Street

City
Chicago

State
IL

Zip Code
60625

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-CLAIMS-Regional Claim

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

872.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007948

Amount of Each Receipt this Period

41.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CARL, MARIANNE, K, ,

Mailing Address 860 Morningside Dr

City
Lake Forest

State
IL

Zip Code
60045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

261.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007908

Amount of Each Receipt this Period

12.43

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

114.32

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chadha, Ranjit, , ,

Mailing Address 2240 Birchwood Lane

City
NorthfieldState
ILZip Code
60093FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP-FSS-Corporate Strategy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007944

Amount of Each Receipt this Period

77.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHADISH, BRENDA, L, ,

Mailing Address 1006 Sewickley Heights Dr

City
SewickleyState
PAZip Code
15143FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Encp-Regional Sales Direc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007680

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHIAPPETTA, VIRGINIA, O, ,

Mailing Address 165 ARLINGTON AVE

City
ELMHURSTState
ILZip Code
60126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ATSV-Communications-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

464.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007801

Amount of Each Receipt this Period

22.13

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

128.13

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLARK, BRIAN, L, ,

Mailing Address 257 Lake Circle

City
MADISON

State
MS

Zip Code
39110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-CAT Finance & Resp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007843

Amount of Each Receipt this Period

19.94

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CLARK, EDWARD, T, ,

Mailing Address 9484 Ashford Place

City
Brentwood

State
TN

Zip Code
37027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

672.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007806

Amount of Each Receipt this Period

32.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CLARK, KELLY, A, ,

Mailing Address 258 FOXFORD DR

City
CARY

State
IL

Zip Code
60013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

432.81

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007823

Amount of Each Receipt this Period

20.61

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

72.55

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CLOUSER, DEBORAH, L, ,

Mailing Address 4667 TAMWORTH DR

City
PALM HARBOR

State
FL

Zip Code
34685

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Mktg-Regional Field-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.75

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007804

Amount of Each Receipt this Period

34.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COCHRANE, PATRICK, E, ,

Mailing Address 6911 Brimstone Lane

City
Fairfax Station

State
VA

Zip Code
22039

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
HR-Client Partnership-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.05

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007699

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COFFEY, PATRICIA, A, ,

Mailing Address 21200 W. KEPWICK

City
KILDEER

State
IL

Zip Code
60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-ATSV-Delivery & Risk

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

453.44

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007785

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

64.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Colella, Daniel, J, ,

Mailing Address 1155 12th St N

City

Jacksonville Beach

State

FL

Zip Code

32250

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

ADS-Product Development-M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007949

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COLLINS, EDWARD, T, ,

Mailing Address 809 DUNHILL COURT

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-L&R-Public Policy Deve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007752

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COLLORA, LINDA, J, ,

Mailing Address 6630 Carriage Way

City

Long Grove

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-ABD-Sales Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

609.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007657

Amount of Each Receipt this Period

29.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

68.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CONLAN, JAMES, A, ,

Mailing Address 310 APPECROSS DRIVE

City
FRANKLIN

State
TN

Zip Code
37064

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABD-Strategic Deployment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007676

Amount of Each Receipt this Period

27.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CONLEE, LARRY, K, ,

Mailing Address 363 Kensington Ct.

City
Palatine

State
IL

Zip Code
60067

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
PO-Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

457.59

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007774

Amount of Each Receipt this Period

21.79

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Conte, KRISTA, A, ,

Mailing Address 5157 Piazza Place

City
El Dorado Hills

State
CA

Zip Code
95762

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1102.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007655

Amount of Each Receipt this Period

58.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.79

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CORRIGAN, PETER, T, ,

Mailing Address 28852 FOREST LAKE LANE

City
GREEN OAKS

State
IL

Zip Code
60048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-ATSV-Group CIO Person

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1485.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007638

Amount of Each Receipt this Period

70.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Crowder, Hall, D, ,

Mailing Address 8 Cajun Ct

City
bedford

State
NH

Zip Code
03110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
PO Fld-State Mgr-Top Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007961

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DAVISON, JOHN, A, ,

Mailing Address 2104 Butternut Ln

City
NORTHBROOK

State
IL

Zip Code
60062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-HO Leadership-Sr M

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

411.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007708

Amount of Each Receipt this Period

19.60

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

119.35

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DECOURSEY, RANDALL, S, ,

Mailing Address 1954 Oakwood Dr

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-ABO-Agency Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1006.53

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007755

Amount of Each Receipt this Period

47.93

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEIGL, JEFFREY, F, ,

Mailing Address 453 PRAIRIE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-PO-Product Vice Presid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1237.11

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007812

Amount of Each Receipt this Period

58.91

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DERRIG, DEIDRE, B, ,

Mailing Address 460 TOWER ROAD

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

L&R-Spcl Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

570.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007799

Amount of Each Receipt this Period

29.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 23 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DiGirolamo, Kristine, , ,

Mailing Address 10123 NORTH RIVER ROAD

City
BARRINGTON HILLS

State
IL

Zip Code
60102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-EthicsComplPriv-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.67

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007835

Amount of Each Receipt this Period

22.27

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dinges, Victoria, A, ,

Mailing Address 421 Chapel Hill Lane

City
Northfield

State
IL

Zip Code
60093

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-CR-Ent. Social Resp.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1430.94

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007912

Amount of Each Receipt this Period

68.14

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Doctor, Pranava, , ,

Mailing Address 2189 Avalon Dr

City
Buffalo Grove

State
IL

Zip Code
60089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-ATSV-Sales & Service T

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007942

Amount of Each Receipt this Period

58.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.41

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DONLAN, BRIAN, M, ,

Mailing Address 1043 W. Monroe St

City
Chicago

State
IL

Zip Code
60607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
PO-Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007857

Amount of Each Receipt this Period

22.05

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dougherty, Heather, C, ,

Mailing Address 12 Laurel Street

City
Rye

State
NY

Zip Code
10580

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABD-Regional Financial Sa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007905

Amount of Each Receipt this Period

18.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DRESSEL, DANIEL, C, ,

Mailing Address 1706 ADLER LANE

City
MALVERN

State
PA

Zip Code
19355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

478.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007685

Amount of Each Receipt this Period

22.77

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.57

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DREXLER, PATRICIA, B, ,

Mailing Address 472 W. SYCAMORE ST.

City
VERNON HILLS

State
IL

Zip Code
60061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
CCC-Contact Center State

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1037.91

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007736

Amount of Each Receipt this Period

58.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Drumtra, Stacy, , ,

Mailing Address 114 E. Euclid Ave

City
Arlington Heights

State
IL

Zip Code
60004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
CR-Strategic Bus Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

778.68

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007913

Amount of Each Receipt this Period

37.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUCHAK, SUSAN, , ,

Mailing Address 4815 HIGHLAND AVE.

City
DOWNERS GROVE

State
IL

Zip Code
60515

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
CR-Philanthropy-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

338.10

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007901

Amount of Each Receipt this Period

16.10

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

111.18

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 117

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DUFF, DONALD, L, ,

Mailing Address 12925 80th St.

City
Bristol

State
WI

Zip Code
53104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABI-Product Line-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

821.73

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007735

Amount of Each Receipt this Period

39.13

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Dufour, Pamela, N, ,

Mailing Address 1804 Aberdeen Drive

City
Glenview

State
IL

Zip Code
60025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-EB-President-ALL Road

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.51

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007956

Amount of Each Receipt this Period

32.31

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DUNN, MICHAEL, S, ,

Mailing Address 18202 HARNISH RD.

City
ROSCOE

State
IL

Zip Code
61073

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-IDE Strategy/Stake

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

631.05

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007792

Amount of Each Receipt this Period

30.05

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101.49

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 117

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DWYER, JEFFREY, P, ,

Mailing Address 44 CHAMPLAIN COURT

City
MANAHAWKINState
NJZip Code
08050FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Claims-Field Leadership O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007637

Amount of Each Receipt this Period

16.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EBY, MATTHEW, B, ,

Mailing Address 605 Downing Road

City
LibertyvilleState
ILZip Code
60048FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007831

Amount of Each Receipt this Period

16.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Edwards, Miguel, , ,

Mailing Address 21 Seneca Ave West

City
Hathorn WoodsState
ILZip Code
60047FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP-AIA-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

968.73

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007943

Amount of Each Receipt this Period

46.13

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

79.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 28 OF 117

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EDWARDS, SHARON, P, ,

Mailing Address 469 E. HOME AVENUE

City
PALATINE

State
IL

Zip Code
60074

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
INV-Financial Planning-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.01

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007761

Amount of Each Receipt this Period

11.81

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EPSTEIN, JAN, B, ,

Mailing Address 2975 ROSLYN LANE

City
BUFFALO GROVE

State
IL

Zip Code
60089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
CR-Philanthropy-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.97

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007651

Amount of Each Receipt this Period

20.57

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FAIR, KARI, C, ,

Mailing Address 1391 ANTHONY ROAD

City
WHEELING

State
IL

Zip Code
60090

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ATSV-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007907

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

52.38

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 117

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fendt, John, L, ,

Mailing Address 5 Lakewood Drive

City
New Windsor

State
NY

Zip Code
12553

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Lit Svcs Attorney-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007937

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Ferguson, Marcus, W, ,

Mailing Address 818 S. Mitchell Ave.

City
Arlington Heights

State
IL

Zip Code
60005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.30

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007951

Amount of Each Receipt this Period

30.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FILIPOVIC, CAROLYN, A, ,

Mailing Address 918 JUNIPER ROAD

City
GLENVIEW

State
IL

Zip Code
60025

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-EthicsComplPriv-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

699.72

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007827

Amount of Each Receipt this Period

33.32

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

83.62

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FINE, STEVEN, , ,

Mailing Address 40375 N. SEA EAGLE CT

City
ANTIOCH

State
IL

Zip Code
60002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Ag Ops-Strategy & Ops-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.63

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007672

Amount of Each Receipt this Period

29.03

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FLORES, GEORGINA, A, ,

Mailing Address 18 S. Merrill St.

City

Park Ridge

State

IL

Zip Code

60068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-MKTG-Prop Lines Lifst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007763

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Flynn, James, J, ,

Mailing Address 351 Village GRN

City

Patchogue

State

NY

Zip Code

11772

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2876.79

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007960

Amount of Each Receipt this Period

193.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

232.03

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FONTANA, ANGELA, K, ,

Mailing Address 1280 WILD ROSE LANE

City
LAKE FOREST

State
IL

Zip Code
60045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-L&R-Allstate Financial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007861

Amount of Each Receipt this Period

58.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fortin, Mary Jane, B, ,

Mailing Address 4510 Shetland Lane

City
Houston

State
TX

Zip Code
77027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
EVP-APL-President Allstat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4053.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007964

Amount of Each Receipt this Period

193.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. FOWLER, ROBERT, B, ,

Mailing Address 147 Airdale Road

City
Bryn Mawr

State
PA

Zip Code
19010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007886

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

271.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. FUSCO, VINCENT, A, ,

Mailing Address 6 SUGAR MAPLE COURT

City
DIX HILLSState
NYZip Code
11746FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

598.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007640

Amount of Each Receipt this Period

28.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GALL, ANNA, M, ,

Mailing Address 1667 FLAGSTONE DRIVE

City
CRYSTAL LAKEState
ILZip Code
60014FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ABI-Operations-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007731

Amount of Each Receipt this Period

18.32

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GARDNER, MARY, C, ,

Mailing Address 4506 DEER TRAIL

City
NORTHBROOKState
ILZip Code
60062FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-EthicsComplPriv-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

298.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007679

Amount of Each Receipt this Period

14.22

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

61.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GEORGAKOPOULOS, NICK, , ,

Mailing Address 1129 N Mitchell Ave

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

INV-External Rptg-Dir

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

883.05

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007778

Amount of Each Receipt this Period

42.05



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GILL, BONNIE, S, ,

Mailing Address 1570 EDGEFIELD LANE

City

HOFFMAN ESTATES

State

IL

Zip Code

60169

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-PO-Product Vice Presid

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

732.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007863

Amount of Each Receipt this Period

34.88



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GILMORE, JOAN, M, ,

Mailing Address 656 S BUCKINGHAM CT

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

L&R-Lit Svcs Attorney HO-

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

987.21

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007643

Amount of Each Receipt this Period

47.01



Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

123.94

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GLENN, JAMES, D, ,

Mailing Address 1038 N. Glenview Court

City
Palatine

State
IL

Zip Code
60067

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

819.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007688

Amount of Each Receipt this Period

39.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOFF, WILLIAM, T, ,

Mailing Address 310 Plantation Way

City
Roswell

State
GA

Zip Code
30075

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007644

Amount of Each Receipt this Period

23.94

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOLDBERG, BRUCE, R, ,

Mailing Address 10 MULBERRY LN

City
HAWTHORN WOODS

State
IL

Zip Code
60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Operations-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

484.05

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007743

Amount of Each Receipt this Period

23.05

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOLICK, RICHARD, M, ,

Mailing Address 2372 SIMPSON FARM WAY

City
SMYRNA

State
GA

Zip Code
30080

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

917.49

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007892

Amount of Each Receipt this Period

43.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOODCHILD, SETH, A, ,

Mailing Address 5415 Reba Street

City
Morton Grove

State
IL

Zip Code
60053

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
PIM Fld-State Mgr-Top Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007625

Amount of Each Receipt this Period

39.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Gordon, Daniel, , ,

Mailing Address 25225 North Iroquois Court

City
Lake Barrington

State
IL

Zip Code
60010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-L&R-Securities & Corpo

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

819.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007955

Amount of Each Receipt this Period

39.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

121.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GOULD, ANN, A, ,

Mailing Address 4071 NEWPORT LANE

City
ARLINGTON HTS

State
IL

Zip Code
60004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

783.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007888

Amount of Each Receipt this Period

37.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRAWE, GEORGE, F, ,

Mailing Address 801 N. Vail Avenue

City
Arlington Heights

State
IL

Zip Code
60004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-L&R-Staff & Retained

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1186.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007710

Amount of Each Receipt this Period

56.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREEN, KELLIE, H, ,

Mailing Address 7262 E Firelands Dr

City
Hudson

State
OH

Zip Code
44236

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-PO-RMBC

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

436.59

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007697

Amount of Each Receipt this Period

20.79

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

114.59

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GREEN, TAMMY, L, ,

Mailing Address 5601 S 80TH STREET

City
LINCOLNState
NEZip Code
68516FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Ops Supt-Leader-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007873

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GREGOIRE, M'BA, G, ,

Mailing Address 35 Linden Road

City
Lake ZurichState
ILZip Code
60047FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Lit Svcs Attorney HO-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

946.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007894

Amount of Each Receipt this Period

45.06

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Grunwell, Howard, R, ,

Mailing Address 1179 Johnson Dr.

City
Buffalo GroveState
ILZip Code
60089FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
CI-Deployment-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007953

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

85.06

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GUIDOS, GREGORY, J, ,

Mailing Address 6130 St. Andrews Ct.

City
Ponte Vedra Beach

State
FL

Zip Code
32082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-EB-President Allstate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1034.32

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007826

Amount of Each Receipt this Period

58.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Gupta, Sanjay, , ,

Mailing Address 1971 Farnsworth Ln

City
Northbrook

State
IL

Zip Code
60062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
EVP-Mktg Innovation & Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1393.35

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007945

Amount of Each Receipt this Period

66.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAIDU, JAMES, W, ,

Mailing Address 3 South Wynstone

City
N. BARRINGTON

State
IL

Zip Code
60010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-PO-Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

234.57

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007794

Amount of Each Receipt this Period

11.17

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

135.52

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALPERN-GIVENS, ROBERT, R, ,

Mailing Address 3001 SUTTON WOODS CT

City
CRYSTAL LAKE

State
IL

Zip Code
60012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
HR-Payroll-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007807

Amount of Each Receipt this Period

18.54

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Harper, David, S, ,

Mailing Address 41 Lancaster Lane

City
Lincolnshire

State
IL

Zip Code
60069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1453.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007927

Amount of Each Receipt this Period

69.22

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Harris, Cheryl, A, ,

Mailing Address 4136 Three Lakes Drive

City
Long Grove

State
IL

Zip Code
60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-ABO-Sourcing & Procur

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1388.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007935

Amount of Each Receipt this Period

66.12

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

153.88

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRIS, CHRISTY, L, ,

Mailing Address 220 SO SUMMIT ST

City
WHEATON

State
IL

Zip Code
60187

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-HR-Talent Acquisition

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007858

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hart, Jacqueline, J, ,

Mailing Address 1431 W. Walton

City
Chicago

State
IL

Zip Code
60642

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
CR-Strategic Bus Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.46

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007916

Amount of Each Receipt this Period

19.26

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAUSCHLDT, KEITH, A, ,

Mailing Address 25 Players Club Villas Rd

City
Ponte Vedra

State
FL

Zip Code
32082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-EB-Allstate Benefits O

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

844.41

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007719

Amount of Each Receipt this Period

40.21

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.47

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 41 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HEALY, JEFFREY, R, ,

Mailing Address 7452 BERKELEY CIRCLE

City

CASTLE ROCK

State

CO

Zip Code

80108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

ABD-Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.74

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007666

Amount of Each Receipt this Period

17.94

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Hedegard, Jon, E, ,

Mailing Address 1314 Rose St. NE

City

Olympia

State

WA

Zip Code

98506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007950

Amount of Each Receipt this Period

34.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HEIGER, JASON, J, ,

Mailing Address 990 INDIAN SPRING LANE

City

BUFFALO GROVE

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

FSS-Audit-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

371.91

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007632

Amount of Each Receipt this Period

17.71

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

69.88

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HEMPHILL, EYVONNA, , ,

Mailing Address 337 46TH AVE

City
BELLWOOD

State
IL

Zip Code
60104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABI-Quality & Compliance-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.01

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007751

Amount of Each Receipt this Period

17.81

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILL, EDDIE, H, ,

Mailing Address 8390 Burnt Chimney Road

City
Wirtz

State
VA

Zip Code
24184

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Ent Svc-Leader-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.25

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007693

Amount of Each Receipt this Period

17.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HILL, WILLIAM, G, ,

Mailing Address 1226 Bowles Road

City
Antioch

State
IL

Zip Code
60002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
EVP-PO-Regional Product M

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

3021.69

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007698

Amount of Each Receipt this Period

143.89

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

178.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HODGES, SHERYL, L, ,

Mailing Address 2510 OAK AVENUE

City
NORTHBROOK

State
IL

Zip Code
60062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Employment Attorney-E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007782

Amount of Each Receipt this Period

15.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOFFMAN, KATHLEEN, K, ,

Mailing Address 796 BRYAN ST.

City
ELMHURST

State
IL

Zip Code
60126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.87

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007800

Amount of Each Receipt this Period

15.47

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLDEN, ROBERT, J, ,

Mailing Address 3012 Canton View Walk

City
Marietta

State
GA

Zip Code
30068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

215.04

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007674

Amount of Each Receipt this Period

10.24

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

41.38

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 44 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOLLANDER, PAMELA, B, ,

Mailing Address 2830 Lexington Lane

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-MKTG-EB Sponsorships P

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007639

Amount of Each Receipt this Period

58.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HORD, FREDERICK, M, ,

Mailing Address 22421 35th Drive SE

City

Bothell

State

WA

Zip Code

98021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

Claims-Field Leadership-D

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.98

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007726

Amount of Each Receipt this Period

20.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOUK, SAM, R, ,

Mailing Address 1158 CIMARRON DR.

City

CARY

State

IL

Zip Code

60013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

LPM-Fin Strategic Ops-Dir

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

680.40

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007756

Amount of Each Receipt this Period

32.40

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.78

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUBER, MARY, L, ,

Mailing Address 1532 NORTH BELMONT AVE.

City

ARLINGTON HTS.

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

HR-Communications-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

447.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007840

Amount of Each Receipt this Period

21.32

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HURLEY, MICHAEL, S, ,

Mailing Address 1225 N. BURGANDY TRAIL

City

JACKSONVILLE

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

ADS-Accounting & Finance-

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

492.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007689

Amount of Each Receipt this Period

23.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. IHM, STEPHEN, L, ,

Mailing Address 21558 W GOLDFINCH CT

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-L&R-Corporate Law

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

1207.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007779

Amount of Each Receipt this Period

60.39

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

105.17

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. IMBARRATO, MARIANO, A, ,

Mailing Address 10825 CHAUCER DRIVE

City
WILLOW SPRINGS

State
IL

Zip Code
60480

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-AF-Capital Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1098.09

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007768

Amount of Each Receipt this Period

52.29

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. IVERSON, LYNNE, A, ,

Mailing Address 890 BLAZING STAR TRAIL

City
CARY

State
IL

Zip Code
60013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
PO-General Mgmt-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.95

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007759

Amount of Each Receipt this Period

32.95

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JAMES, CRAIG, A, ,

Mailing Address 235 HEATHER AVE

City
GRAYSLAKE

State
IL

Zip Code
60030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ATSV-Six Sigma-Sr Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

310.17

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007818

Amount of Each Receipt this Period

14.77

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 47 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. JAMIESON, JAMES, C, ,

Mailing Address 935 Lancaster Rd..

City

Lake Zurich

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

ARE-Real Estate & Constr

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

902.79

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007739

Amount of Each Receipt this Period

42.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JILLSON, LISA, A, ,

Mailing Address 4524 N. MAPLEWOOD

City

CHICAGO

State

IL

Zip Code

60625

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

Mktg-IMC Plng & Execution

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007902

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. JOHNSON, CHARIS, L, ,

Mailing Address 260 LINKWOOD ROAD

City

ATLANTA

State

GA

Zip Code

30318

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

L&R-Lit Svcs Attorney-Exp

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

696.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007707

Amount of Each Receipt this Period

58.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 48 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Johnson, Jerry, A, ,

Mailing Address 5233 Tree Way Lane South

City
Jacksonville

State
FL

Zip Code
32258

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ATSV-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007933

Amount of Each Receipt this Period

18.45

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. JONSKE, JAMES, W, ,

Mailing Address 1217 BARCLAY CIRCLE

City
BARRINGTON

State
IL

Zip Code
60010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-PO-Standard Auto

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007829

Amount of Each Receipt this Period

19.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KANE, JOHN, A, ,

Mailing Address 11 Ups N Downs Court

City
Flemington

State
NJ

Zip Code
08822

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

551.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007649

Amount of Each Receipt this Period

26.24

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KATHRENS, TIMOTHY, M, ,

Mailing Address 703 HIGHLAND CT

City
GRAYSLAKE

State
IL

Zip Code
60030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ATSV-Compliance-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.62

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007834

Amount of Each Receipt this Period

19.22

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KELLER, CRAIG, A, ,

Mailing Address 958 N DEER AVE

City
PALATINE

State
IL

Zip Code
60067

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
CR-Strategic Bus Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007911

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KIAH, CHRISTOPHER, R, ,

Mailing Address 221 BRAMPTON LN

City
LAKE FOREST

State
IL

Zip Code
60045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-ABO-Portfolio Mgmt &

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1240.68

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007628

Amount of Each Receipt this Period

59.08

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

107.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 50 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. King, Stephen, B, ,

Mailing Address 1620 Monterey

City
Glenview

State
IL

Zip Code
60026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-HR-Leadership & Talent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.98

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007922

Amount of Each Receipt this Period

31.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Klemstein, Brian, D, ,

Mailing Address 608 Haddon Circle

City

Vernon Hills

State
IL

Zip Code
60061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
INV-AFCO-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

349.86

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007914

Amount of Each Receipt this Period

16.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KLODZINSKI, STEVEN, T, ,

Mailing Address 18699 W. State Line Road

City

Antioch

State
IL

Zip Code
60002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

303.03

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007791

Amount of Each Receipt this Period

14.43

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

62.47

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 51 OF 117

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KNAPP, TIMOTHY, L, ,

Mailing Address 132 FARMSTEAD CIRCLE

City
LEBANONState
PAZip Code
17042FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

492.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007681

Amount of Each Receipt this Period

23.47

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KNIPP, JEFFREY, D, ,

Mailing Address 2050 GLENDALE AVE

City
NORTHBROOKState
ILZip Code
60062FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
LifeUWCL-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.94

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007866

Amount of Each Receipt this Period

40.14

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Knudsen-Miner, CHRISTINE, K, ,

Mailing Address 2559 Forest Court

City
LindenhurstState
ILZip Code
60046FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
PIM Fld-State Mgr-Top Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

609.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007711

Amount of Each Receipt this Period

29.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

92.61

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KULLMAN, J Wayne, W, ,

Mailing Address 2005 Henley St.

City
GLENVIEWState
ILZip Code
60025FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP-APL-Strategic Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

529.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007705

Amount of Each Receipt this Period

25.22

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LANSPA, PAUL, D, ,

Mailing Address 3819 PARSONS ROAD

City
CARPENTERSVILLEState
ILZip Code
60110FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ALR Dist-Agent Comp-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007869

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEASENDALE, JEFFREY, F, ,

Mailing Address 422 RIDGECREST RD NE

City
ATLANTAState
GAZip Code
30307FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Lit Svcs Attorney-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

356.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007670

Amount of Each Receipt this Period

16.98

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

77.20

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LEDDER, JAMES, A, ,

Mailing Address 3613 Sutton Woods Drive

City

Prairie Grove

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-CLAIMS-Product Line Ex

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007673

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEES, SUSAN, L, ,

Mailing Address 1950 Merritt Lane

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

EVP-L&R-Gen'l Counsel & C

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2422.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007626

Amount of Each Receipt this Period

115.38

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LEVINE, GARY, L, ,

Mailing Address 16340 W. Arlington Drive

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

447.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007851

Amount of Each Receipt this Period

22.10

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

157.48

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 54 OF 117
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lewis, Jody, K, ,

Mailing Address 209 S. 18th

City
PocatelloState
IDZip Code
83201FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
CCC-Leader-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	D D	Y Y Y Y
10	14	2016

Transaction ID : A2016-2007938

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LIHOSIT, STEVEN, A, ,

Mailing Address 6725 ASPEN ROAD

City
LISLEState
ILZip Code
60532FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Lit Svcs Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M	D D	Y Y Y Y
10	14	2016

Transaction ID : A2016-2007749

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Logothetis, Peter, G, ,

Mailing Address 2326 Indian Ridge Drive

City
GlenviewState
ILZip Code
60026FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-ATSV Group CIO/CTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1269.03

Date of Receipt

M M	D D	Y Y Y Y
10	14	2016

Transaction ID : A2016-2007931

Amount of Each Receipt this Period

58.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

98.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 117
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lovest, ANGELA, M, ,

Mailing Address 29 Tullach Place

City
StonebraeState
CAZip Code
94542FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Ag Ops-Strategy & Ops-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

622.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007684

Amount of Each Receipt this Period

29.65

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LOWE, RHONDA, J, ,

Mailing Address 2501 Catoctin Court Unit 3A

City
FrederickState
MDZip Code
21702FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007819

Amount of Each Receipt this Period

16.32

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUCETT, GREGORY, J, ,

Mailing Address P.O. BOX 9242

City
GLENDALEState
CAZip Code
91226FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Lit Svcs Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

868.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007891

Amount of Each Receipt this Period

46.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

91.97

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LUCIANO, ANTHONY, R, ,

Mailing Address 8891 TIMBERJACK LANE

City
JACKSONVILLEState
FLZip Code
32256FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ATSV-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007662

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LUECHT, COREY, C, ,

Mailing Address 843 Spring Cove Dr

City
SCHAUMBURGState
ILZip Code
60193FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SPS-Sourcing-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.19

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007790

Amount of Each Receipt this Period

23.39

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LUMICAO, BENJAMIN, E, ,

Mailing Address 9655 Woods Drive Unit 708

City
SkokieState
ILZip Code
60077FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

760.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007802

Amount of Each Receipt this Period

36.23

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

88.62

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LUSTIG, TERESA, , ,

Mailing Address 477 NORTH NEWPORT

City
CHANDLER

State
AZ

Zip Code
85225

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Fld SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

10 / 14 / 2016

Transaction ID : A2016-2007703

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Mabe, Katherine, A, ,

Mailing Address 2750 Commons Drive

City
Glenview

State
IL

Zip Code
60026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
EVP-APL-Allstate Brand Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2471.49

Date of Receipt

10 / 14 / 2016

Transaction ID : A2016-2007930

Amount of Each Receipt this Period

117.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MACDONALD, DANIEL, J, ,

Mailing Address 2250 RIDGETRAIL DR

City
CASTLE ROCK

State
CO

Zip Code
80104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABD-FSL Growth-Assoc Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

480.90

Date of Receipt

10 / 14 / 2016

Transaction ID : A2016-2007839

Amount of Each Receipt this Period

22.90

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.59

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Macellaro, Patrick, J, ,

Mailing Address 2829 Twin Oaks Drive

City
HIGHLAND PARK

State
IL

Zip Code
60035

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-EB-President Encompas

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007656

Amount of Each Receipt this Period

39.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MARCOTTE, KENNETH, P, ,

Mailing Address 2311 HAVERTON DR

City
MUNDELEIN

State
IL

Zip Code
60060

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.51

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007750

Amount of Each Receipt this Period

25.31

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Marlow, Clint, J, ,

Mailing Address 10553 Braeburn Rd

City
Barrington Hills

State
IL

Zip Code
60010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-HO Leadership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007630

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

84.31

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Masser, Rhonda, J, ,

Mailing Address 4807 Wildwood Dr

City
McHenryState
ILZip Code
60051FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1187.26

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007728

Amount of Each Receipt this Period

58.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MATHES, THOMAS, R, ,

Mailing Address 24671 Salmon River Place

City
AldieState
VAZip Code
20105FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
PIM Fld-State Mgr-Top Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.15

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007634

Amount of Each Receipt this Period

19.09

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MATHEWS, JOHN, R, ,

Mailing Address 401 E NORTH AVENUE

City
LAKE BLUFFState
ILZip Code
60044FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

488.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007803

Amount of Each Receipt this Period

23.27

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

100.36

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MC LAUGHLIN, JOHN, A, ,

Mailing Address 25748 N. Stoney Kirk Ct.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

901.74

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007766

Amount of Each Receipt this Period

42.94



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCCONNELL, SCOTT, A, ,

Mailing Address 21722 N TIMBER RIDGE CT

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

INV-Manager-Dir

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007724

Amount of Each Receipt this Period

29.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCDONNELL, THOMAS, R, ,

Mailing Address 1519 Lincoln Street

City

EVANSTON

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-PF-Property & Casualty

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

1207.71

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007838

Amount of Each Receipt this Period

57.51



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

129.45

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. McElroy, LEE, L, ,

Mailing Address 5577 Aspen Meadows Dr

City

El Dorado Hills

State

CA

Zip Code

95762

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

ABD-Regional Financial Sa

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

388.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007883

Amount of Each Receipt this Period

18.50

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCELVAIN, PETER, A, ,

Mailing Address 587 RIFORD ROAD

City

GLEN ELLYN

State

IL

Zip Code

60137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

L&R-Investment Attorney-T

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

955.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007777

Amount of Each Receipt this Period

45.50

☐

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCGILLIVRAY, MARK, A, ,

Mailing Address 1028 PORTSMOUTH CIRCLE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

SVP-CLAIMS-Centralized Se

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

703.08

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007878

Amount of Each Receipt this Period

33.48

☐

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

97.48

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 62 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCINTEE, EVA, M, ,

Mailing Address 4109 W Bath Road

City
Akron

State
OH

Zip Code
44333

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

983.01

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007875

Amount of Each Receipt this Period

46.81

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCRAE, JEFFREY, J, ,

Mailing Address 25365 N. Northbridge RD

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-ATSV-Technology Strat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.71

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007716

Amount of Each Receipt this Period

30.51

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Mejia, Heather, M, ,

Mailing Address 1828 West Huron

City

Chicago

State

IL

Zip Code

60622

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
PO-Prop Pricing Strategy-

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

609.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007919

Amount of Each Receipt this Period

29.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.32

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MELLON, JANE, M, ,

Mailing Address 184 GARFIELD

City
ELMHURSTState
ILZip Code
60126FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Employment Attorney-T

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007754

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Merten, Jesse, E, ,

Mailing Address 76 Logan Loop

City
Highland ParkState
ILZip Code
60035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-FSS-Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1512.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007932

Amount of Each Receipt this Period

72.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. METZINGER, HANS, H, ,

Mailing Address 407 E. CLAIRE LANE

City
PROSPECT HTSState
ILZip Code
60070FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Fld SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

398.40

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007784

Amount of Each Receipt this Period

19.92

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

120.92

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 64 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MICHELI, JOHN, W, ,

Mailing Address 2245 Hazeltine Drive

City
Vernon Hills

State
IL

Zip Code
60061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-ABO-Enterprise Servic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

464.94

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007652

Amount of Each Receipt this Period

22.14

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, FREDERICK, J, ,

Mailing Address 16343 Smith Mountain Lake Parkway

City
Huddleston

State
VA

Zip Code
24104

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABD-Territory Sales Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.66

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007723

Amount of Each Receipt this Period

35.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLER, STEVEN, M, ,

Mailing Address 655 W Irving Park

City
Chicago

State
IL

Zip Code
60613

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-AF-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

549.36

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007822

Amount of Each Receipt this Period

26.16

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

83.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MILLS, AMY, B, ,

Mailing Address 850 Fair Oaks Avenue

City
Deerfield

State
IL

Zip Code
60015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.68

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007900

Amount of Each Receipt this Period

23.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MISQUEZ, ALLISON, , ,

Mailing Address 578 Patriot Court

City
Gurnee

State
IL

Zip Code
60031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-Project Mgmt-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.41

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007881

Amount of Each Receipt this Period

15.21

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MITCHELL, AMBER, L, ,

Mailing Address 922 Cleveland Ave

City
Park Ridge

State
IL

Zip Code
60068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

282.24

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007909

Amount of Each Receipt this Period

13.44

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

51.73

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 66 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MOE, ALLISON, L, ,

Mailing Address 215 Brampton Lane

City
Lake Forest

State
IL

Zip Code
60045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-PO-Product Vice Presid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.07

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007767

Amount of Each Receipt this Period

31.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MORALES, DEBBIE, A, ,

Mailing Address 21285 S. BOSCHOME CIRCLE

City
KILDEER

State
IL

Zip Code
60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-HO Leadership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007848

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Morgan, Donna, B, ,

Mailing Address 8530 Festival Loop

City
Chattanooga

State
TN

Zip Code
37419

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AB-Sales Enrollment-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007958

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Morrison, Jessica, C, ,

Mailing Address 754 S. Ravinia Circle

City
PalatineState
ILZip Code
60074FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

754.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007918

Amount of Each Receipt this Period

58.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MOSELEY, JAMES, R, ,

Mailing Address 1709 Montclair Blvd

City
BrentwoodState
TNZip Code
37027FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
HR-Client Partnership-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.07

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007701

Amount of Each Receipt this Period

17.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MUELLER, DAVID, J, ,

Mailing Address 642 Maple Lane

City
BataviaState
ILZip Code
60510FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

339.15

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007771

Amount of Each Receipt this Period

16.15

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

91.82

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MULVIHILL, MEGHAN, O, ,

Mailing Address 2445 CHERRY LANE

City
NORTHBROOK

State
IL

Zip Code
60062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-State Filings-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.87

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007694

Amount of Each Receipt this Period

42.47

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MULVIHILL, MICHAEL, F, ,

Mailing Address 2445 CHERRY LANE

City
NORTHBROOK

State
IL

Zip Code
60062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

961.17

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007745

Amount of Each Receipt this Period

45.77

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MURRAY, JAMES, E, ,

Mailing Address 23665 N. HILLFARM RD

City
LAKE BARRINGTON

State
IL

Zip Code
60010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-CLAIMS-Claims Executiv

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1177.47

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007622

Amount of Each Receipt this Period

56.07

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

144.31

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MYKETIAK, DON, J, ,

Mailing Address 28W770 HAWTHORNE LANE

City

WEST CHICAGO

State

IL

Zip Code

60185

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

FSS-Accounting-Sr Mgr

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

338.94

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007783

Amount of Each Receipt this Period

16.14

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NADIG, DAVID, G, ,

Mailing Address 2950 LAKE PLACID

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

SVP-L&R-Protection Law

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1450.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007814

Amount of Each Receipt this Period

69.06

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. NECASTRO, DANIEL, C, ,

Mailing Address 22622 N. LINDEN DR

City

LAKE BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

SVP-ATSV-Bus Prtn-Busines

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

1370.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007734

Amount of Each Receipt this Period

58.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

143.20

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Neely, Stephanie, D, ,

Mailing Address 1140 E 44th St.

City
ChicagoState
ILZip Code
60653FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP-FSS-Assistant Treasure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.68

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007959

Amount of Each Receipt this Period

23.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. NOLL, PATRICK, K, ,

Mailing Address 22451 THORNBURY CT

City
DEER PARKState
ILZip Code
60010FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-L&R-Enterprise Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007860

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. O'BRIEN, KIMBERLY, A, ,

Mailing Address 2250 Brimstone Place

City
HanoverState
MDZip Code
21076FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

609.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007732

Amount of Each Receipt this Period

29.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

127.08

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. O'Donnell, John, F, ,

Mailing Address 4976 Wild Rose Lane

City

Long Grove

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007925

Amount of Each Receipt this Period

20.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. O'SULLIVAN, BRIAN, G, ,

Mailing Address 1609 ONEIDA COURT

City

MT PROSPECT

State

IL

Zip Code

60056

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.93

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007805

Amount of Each Receipt this Period

10.00



Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. OCONNOR, MICHAEL, C, ,

Mailing Address 1231 Isabella Street

City

Evanston

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

Mktg-Regional HO-Dir

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

349.23

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007747

Amount of Each Receipt this Period

16.63



Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

46.63

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 72 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. OMURA, KENNETH, I, ,

Mailing Address 361 KELBURN RD. #315

City
DEERFIELD

State
IL

Zip Code
60015

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

886.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007720

Amount of Each Receipt this Period

42.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. OVERTON, PAMELA, J, ,

Mailing Address 1677 Lee Road

City
Clearwater

State
FL

Zip Code
33765

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-Field Leadership F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1105.86

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007715

Amount of Each Receipt this Period

52.66

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PATTERSON, LAWRENCE, N, ,

Mailing Address 64 RIVER DRIVE

City
ANNAPOLIS

State
MD

Zip Code
21403

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Gov & Ind Rel-Sr Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007691

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

114.89

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 73 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PATTI, TONY, , ,

Mailing Address 2095 Westfield Road Circle

City
SCOTCH PLAINS

State
NJ

Zip Code
07076

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Lit Svcs Attorney-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007874

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PEPPING, RONALD, J, ,

Mailing Address 2721 Acorn Ct.

City
West Dundee

State
IL

Zip Code
60118

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Encp-Sales Admin-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007786

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

c. Perry, Opal, G, ,

Mailing Address 2775 N. Sanders Rd.

City
Northbrook

State
IL

Zip Code
60062

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-ATSV-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1020.81

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007940

Amount of Each Receipt this Period

48.61

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

106.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 117

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PETERSON, THOMAS, S, ,

Mailing Address 2756 BRECKENRIDGE LANE

City
NAPERVILLE

State
IL

Zip Code
60565

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Encp-Distribution Deploy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

763.35

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007904

Amount of Each Receipt this Period

36.35

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PHILLIPS, NANCY, W, ,

Mailing Address 102 RIVER OAKS RD

City
BRENTWOOD

State
TN

Zip Code
37027

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Lit Svcs Attorney-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.84

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007713

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pierce, Lisa, K, ,

Mailing Address 1608 Cooper Creek Lane

City
Franklin

State
TN

Zip Code
37064

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007957

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 75 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PINTOZZI, JOHN, C, ,

Mailing Address 2114 W Cortland ST

City
CHICAGO

State
IL

Zip Code
60647

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

878.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007733

Amount of Each Receipt this Period

41.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PONDICHERY, SREENIVAS, P, ,

Mailing Address 1027 W VERNON PARK PL Apt H

City
CHICAGO

State
IL

Zip Code
60607

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ATSV-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007668

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PORTER, RICHARD, E, ,

Mailing Address 20827 36TH PL W

City
LYNNWOOD

State
WA

Zip Code
98036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-Adj TPLC Rep-Sr Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

239.61

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007879

Amount of Each Receipt this Period

11.41

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. POZZI, BRIAN, M, ,

Mailing Address 12 Shenandoah Lane

City
Hawthorn Woods

State
IL

Zip Code
60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
PO-Line Management-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.42

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007627

Amount of Each Receipt this Period

21.02

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PRENDERGAST, DAVID, J, ,

Mailing Address 8262 Arrowleaf Turn

City
Gainesville

State
VA

Zip Code
20155

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
EVP-ABD-Pres. Eastern Ter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1779.54

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007650

Amount of Each Receipt this Period

84.74

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Pugsley, David, L, ,

Mailing Address 219 8th Avenue South

City
Jacksonville Beach

State
FL

Zip Code
32250

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AB-Enrollment Solutions-M

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007963

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

115.76

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. QUINN, MARY JO, J, ,

Mailing Address 837 S. CHESTNUT AVENUE

City
ARLINGTON HEIGH

State
IL

Zip Code
60005

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-L&R-Investment Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1042.44

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007832

Amount of Each Receipt this Period

49.64

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REARDON, JOHN, B, ,

Mailing Address 441 KELLY LANE

City
CRYSTAL LAKE

State
IL

Zip Code
60012

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-HO Leadership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007631

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RIZZO, MARIO, , ,

Mailing Address 5926 W. 90TH PLACE

City
OAK LAWN

State
IL

Zip Code
60453

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-APL-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1398.60

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007770

Amount of Each Receipt this Period

66.60

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

136.24

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Roberts, Kendra, L, ,

Mailing Address One North O'Plaine Road #7894

City
GurneeState
ILZip Code
60031FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.73

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007921

Amount of Each Receipt this Period

23.13

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBINSON, ROGER, S, ,

Mailing Address 5321 North Lincoln Avenue

City
ChicagoState
ILZip Code
60625FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
CR-Regional Bus Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.62

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007706

Amount of Each Receipt this Period

28.22

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROHLFING, GREGORY, C, ,

Mailing Address 1615 N 78th Ct

City
Elmwood ParkState
ILZip Code
60707FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

984.90

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007730

Amount of Each Receipt this Period

46.90

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

98.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROSZKOWSKI, JOHN, , ,

Mailing Address 3371 VENARD RD.

City
DOWNERS GROVEState
ILZip Code
60515FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ATSV-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007797

Amount of Each Receipt this Period

43.97

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RUDD, DONALD, L, ,

Mailing Address 25 CRESTVIEW TERRACE

City
BUFFALO GROVEState
ILZip Code
60089FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ATSV-Systems Analyst-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007865

Amount of Each Receipt this Period

15.06

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Rugel, John, , ,

Mailing Address 10 Lancelot Lane

City
Hawthorn WoodsState
ILZip Code
60047FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-ABO-Life UW & Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007939

Amount of Each Receipt this Period

58.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

117.03

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. RUSSELL, CASSANDRA, C, ,

Mailing Address 2579 E Kaibab PI

City
ChandlerState
AZZip Code
85249FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

413.28

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007846

Amount of Each Receipt this Period

19.68

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RYSKE, PAUL, R, ,

Mailing Address 898 LONGWOOD DR.

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Spcl Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

981.33

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007729

Amount of Each Receipt this Period

46.73

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Sands, Donald, D, ,

Mailing Address 321 North Brainard Avenue

City

Lagrange Park

State

IL

Zip Code

60526

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP-APL-Strategic Dist. Bu

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1240.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007928

Amount of Each Receipt this Period

59.08

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

125.49

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 81 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SARB, PATRICK, J, ,

Mailing Address 4517 WAUBANSIE LANE

City
LISLE

State
IL

Zip Code
60532

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ARE-Environmental Sci-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.20

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007828

Amount of Each Receipt this Period

16.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAVAGE, BRIAN, J, ,

Mailing Address 1506 Old Peterson Rd.

City
Libertyville

State
IL

Zip Code
60048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-EB-Chief Financial Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007741

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHECHT, KAREN, M, ,

Mailing Address 754 Pinellas Bayway S

City
Tierra Verde

State
FL

Zip Code
33715

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-CLAIMS-Encompass Claim

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

375.27

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007772

Amount of Each Receipt this Period

17.87

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

54.07

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHOLL, STEPHEN, E, ,

Mailing Address 7 COPPERFIELD DRIVE

City
HAWTHORN WOODS

State
IL

Zip Code
60047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1281.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007678

Amount of Each Receipt this Period

61.04

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHUELLER, DALE, J, ,

Mailing Address 25 Scarlet Oak Rd

City
Flemington

State
NJ

Zip Code
08822

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABD-Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

473.13

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007864

Amount of Each Receipt this Period

22.53

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SCHUTT, PAUL, , ,

Mailing Address 6323 N. NORMANDY

City
CHICAGO

State
IL

Zip Code
60631

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1225.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007769

Amount of Each Receipt this Period

58.38

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

141.95

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SCHWARTZER, DAVID, J, ,

Mailing Address 128 Waverly Circle

City
PhoenixvilleState
PAZip Code
19460FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1174.11

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007837

Amount of Each Receipt this Period

55.91

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHWARZHAUPT, ALBERT, , ,

Mailing Address 29 Doral Drive

City
Hawthorn WoodsState
ILZip Code
60047FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Ag Ops-Strat Deployment-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.82

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007661

Amount of Each Receipt this Period

18.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Scott, Corinne, L, ,

Mailing Address 2173 Ranch View Drive

City
RocklinState
CAZip Code
95765FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ABI-Sr Commercial Busines

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

343.56

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007924

Amount of Each Receipt this Period

16.36

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

90.69

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 84 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Scott, Obie, A, ,

Mailing Address 2173 Ranch View Dr.

City
Rocklin

State
CA

Zip Code
95765

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABD-Territory Sales Leade

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.22

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007890

Amount of Each Receipt this Period

31.82

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Shapiro, Glenn, T, ,

Mailing Address 2460 Violet Street

City
Glenview

State
IL

Zip Code
60026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
EVP-CLAIMS-Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

696.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007967

Amount of Each Receipt this Period

58.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHARPE, STACY, Y, ,

Mailing Address 1100 N. Lake Shore Drive

City
Chicago

State
IL

Zip Code
60611

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-CR-Strategic & Consum

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1228.92

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007793

Amount of Each Receipt this Period

58.52

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 85 OF 117

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHEBIK, STEVEN, E, ,

Mailing Address 517 ROBINWOOD LANE

City
WHEATONState
ILZip Code
60189FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
EVP-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3634.68

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	14	2016

Transaction ID : A2016-2007775

Amount of Each Receipt this Period

173.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SHEFFEY, STEVEN, R, ,

Mailing Address 839 SUMAC

City
HIGHLAND PARKState
ILZip Code
60035FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.54

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	14	2016

Transaction ID : A2016-2007727

Amount of Each Receipt this Period

22.74

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SHORES, ADAM, R, ,

Mailing Address 680 Brookstone Road

City
GrayslakeState
ILZip Code
60030FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Public Affairs-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

624.12

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
10	14	2016

Transaction ID : A2016-2007899

Amount of Each Receipt this Period

29.72

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

225.54

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 86 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SHUNTA, DENIS, C, ,

Mailing Address 5200 RIDGEGATE WAY

City
FAIR OAKS

State
CA

Zip Code
95628

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
PO Fld-FPMO-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.07

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007825

Amount of Each Receipt this Period

24.67

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SILVA, JAVIER, , ,

Mailing Address 3549 N. OZANAM

City
CHICAGO

State
IL

Zip Code
60634

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AgentSvc-Reg Business Par

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.52

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007740

Amount of Each Receipt this Period

14.12

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SIMMONS, ROBERT, L, ,

Mailing Address 1146 39th Ave NE

City
St Petersburg

State
FL

Zip Code
33703

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

778.89

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007669

Amount of Each Receipt this Period

37.09

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75.88

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 87 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SINNICKI, JOHN, G, ,

Mailing Address 2117 CARROLL CREEK VIEW CT

City
FREDERICK

State
MD

Zip Code
21702

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-Mgmt OS Compliance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007712

Amount of Each Receipt this Period

13.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Sintich, Timothy, P, ,

Mailing Address 36 Marco Island Way

City
Ponte Vedra

State
FL

Zip Code
32081

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
AB-Field Vice President-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007920

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SLOANE, KIMBERLY, J, ,

Mailing Address 650 Rochelle Terrace

City
LOMBARD

State
IL

Zip Code
60148

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
FSS-Risk Mgmt-Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

685.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007789

Amount of Each Receipt this Period

32.65

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

66.07

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, ANN, M, ,

Mailing Address 16801 Carmichael Place

City

Purcellville

State

VA

Zip Code

20132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

ABD-Sales Administrative

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

327.18

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007636

Amount of Each Receipt this Period

15.58

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, CHARLES, M, ,

Mailing Address 414 E. Burr Oak Dr.

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

834.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007841

Amount of Each Receipt this Period

39.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SMITH, KATHERINE, A, ,

Mailing Address 231 KAINER AVENUE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

L&R-Corp Gov Attorney-Dir

Receipt For:

☐ Primary
☐ Other (specify)

General

Aggregate Year-to-Date ▼

414.75

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007776

Amount of Each Receipt this Period

19.75

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

75.08

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SMITH, KENNETH, D, ,

Mailing Address 619 N. HUMPHREY AVE.

City
OAK PARK

State
IL

Zip Code
60302

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ARE-Architect & Constr-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007795

Amount of Each Receipt this Period

17.46

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SMITH, RICHARD, J, , Jr.

Mailing Address 75 N. Lake Ave

City
Third Lake

State
IL

Zip Code
60030

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-PO-Product Vice Presid

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

922.98

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007849

Amount of Each Receipt this Period

58.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SNITTJER, RANDALL, D, ,

Mailing Address 11423 E. Blue Sky Drive

City
Scottsdale

State
AZ

Zip Code
85262

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-PF-Agency Economics

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

551.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007867

Amount of Each Receipt this Period

29.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

104.46

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SOILEAU, CARY, D, ,

Mailing Address 355 E OHIO ST

City
INDIANAPOLISState
INZip Code
46204FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007850

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SORENSON, STEVEN, P, ,

Mailing Address 20712 High Ridge Dr

City
KILDEERState
ILZip Code
60047FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
EVP-PO-Product Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2096.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007833

Amount of Each Receipt this Period

99.82

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SPARKS, WILLIAM, R, ,

Mailing Address 2279 ENLUND DRIVE #2

City
PALATINEState
ILZip Code
60074FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-EthicsComplPriv-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007717

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

139.82

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 91 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPATARO, KEVIN, A, ,

Mailing Address 1663 SARATOGA LANE

City
GLENVIEW

State
IL

Zip Code
60026

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

847.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007809

Amount of Each Receipt this Period

40.36

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SPENCE, BRIAN, M, ,

Mailing Address 2936 N. Lincoln Ave.

City
Chicago

State
IL

Zip Code
60657

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
FSS-Corp Development-Sr M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

671.79

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007821

Amount of Each Receipt this Period

31.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Spencer, Gilda, L, ,

Mailing Address 1675 N. Pebble Beach Way

City
Vernon Hills

State
IL

Zip Code
60061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-L&R-Dispute Resolutio

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1016.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007946

Amount of Each Receipt this Period

58.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 92 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SPRINGBERG, MARY, , ,

Mailing Address 4745 KINGS WAY - NORTH

City
GURNEE

State
IL

Zip Code
60031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-ATSV-Bus Prtn-Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1308.51

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007721

Amount of Each Receipt this Period

62.31

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STAPLETON, DIANE, M, ,

Mailing Address 14975 S. Highland Ave. #97

City
Fontana

State
CA

Zip Code
92336

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABD-Sales Administrative

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007624

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. STERE, GARY, S, ,

Mailing Address 2015 SELVA MADERA COURT

City
ATLANTIC BEACH

State
FL

Zip Code
32233

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

954.45

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007709

Amount of Each Receipt this Period

45.45

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

127.76

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 OF 117

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. STOLTE, JOHN, A, ,

Mailing Address 330 KAREN WAY

City
TIBURONState
CAZip Code
94920FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ABD-Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007882

Amount of Each Receipt this Period

20.41

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. STOUFFER, MYRON, E, ,

Mailing Address 324 W. Cook

City
LIBERTYVILLEState
ILZip Code
60048FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-APL-Indpt. Agencies &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007704

Amount of Each Receipt this Period

32.98

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SULLIVAN, DANIEL, J, ,

Mailing Address 4018 BERRYWOOD DRIVE

City
SEAFORDState
NYZip Code
11783FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ABD-FSL Growth-Assoc Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

291.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2016

Transaction ID : A2016-2007665

Amount of Each Receipt this Period

13.89

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

67.28

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 94 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TACKETT, CARL, J, ,

Mailing Address 307 WENDRON COURT

City
FRANKLIN

State
TN

Zip Code
37069

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ALR Dist-Leadership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.42

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007744

Amount of Each Receipt this Period

21.02

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Taylor, Lori, , ,

Mailing Address 37625 Charlotte Drive

City
Wadsworth

State
IL

Zip Code
60083

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
CR-Strategic Bus Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

348.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007952

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TEAGUE, JOHN, M, ,

Mailing Address 7689 Cascade Way

City
Gurnee

State
IL

Zip Code
60031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

493.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007702

Amount of Each Receipt this Period

29.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

79.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 OF 117

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Testa, Mark, J, ,

Mailing Address 9613 185th Dr SE

City
SnohomishState
WAZip Code
98290FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
VP-ABD-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007962

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THAKUR, SEAN, D, ,

Mailing Address 222 S.Caldwell St

City
CharlotteState
NCZip Code
28202FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
Ent Svc-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.99

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007852

Amount of Each Receipt this Period

20.19

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Thomas, Joy, A, ,

Mailing Address 2240 Henley Street

City
GlenviewState
ILZip Code
60025FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
CC-Connected Car PD-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

312.27

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007923

Amount of Each Receipt this Period

14.87

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

64.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 96 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMAS, MICHAEL, A, ,

Mailing Address 152 Robsart Place

City
KENILWORTH

State
IL

Zip Code
60043

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-ABO-Administration & R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.96

Date of Receipt

10 / 14 / 2016

Transaction ID : A2016-2007903

Amount of Each Receipt this Period

29.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THOMAS, SHANTELE, A, ,

Mailing Address 906 N. Vail Ave.

City
Arlington Heights

State
IL

Zip Code
60004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-FSS-Insurance Claims R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.00

Date of Receipt

10 / 14 / 2016

Transaction ID : A2016-2007898

Amount of Each Receipt this Period

58.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THOMPSON, GERALYN, A, ,

Mailing Address 6906 S. BENNETT

City
CHICAGO

State
IL

Zip Code
60649

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
CR-Strategic Bus Comm-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

737.73

Date of Receipt

10 / 14 / 2016

Transaction ID : A2016-2007764

Amount of Each Receipt this Period

35.13

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

122.13

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 97 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. THOMPSON, WILLIAM, J, ,

Mailing Address 5129 Pine River Trail

City

Castle Rock

State

CO

Zip Code

80108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1148.49

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007700

Amount of Each Receipt this Period

54.69

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Trudan, Dan, , ,

Mailing Address 16725 Reinsch Drive

City

Davidson

State

NC

Zip Code

28036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

SVP-ABO-Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2160.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007965

Amount of Each Receipt this Period

135.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. TUNNER, MELINDA, S, ,

Mailing Address 190 West Johnson Street

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

VP-ABD-Sales Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007847

Amount of Each Receipt this Period

58.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

247.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. TURANO, RICHARD, D, ,

Mailing Address 4960 S CHESTER ST

City
ENGLEWOODState
COZip Code
80111FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.56

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007654

Amount of Each Receipt this Period

23.36

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. TURNER-HAWKINS, TWANDA, , ,

Mailing Address 1629 S. Prairie Avenue # 905

City
ChicagoState
ILZip Code
60616FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007842

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. URE, JEFFREY, W, ,

Mailing Address 609 S. KENNICOTT AVE

City
ARLINGTON HTSState
ILZip Code
60005FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
ATSV-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

222.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007781

Amount of Each Receipt this Period

10.60

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

53.96

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 99 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VAINISI, WILLIAM, A, ,

Mailing Address 636 BALMORAL LANE

City
INVERNESSState
ILZip Code
60067FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-L&R-Government & Indu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1390.83

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007773

Amount of Each Receipt this Period

66.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VAN SCOYOC, LISA, A, ,

Mailing Address 555 PRIMROSE LANE

City
CRYSTAL LAKEState
ILZip Code
60014FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
FSS-Accounting-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.94

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007780

Amount of Each Receipt this Period

18.14

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VANLAMMEREN, PATRICIA, C, ,

Mailing Address 9725 Woods Drive

City
SkokieState
ILZip Code
60077FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance CompanyOccupation (for Individual)
SVP-APL-Field Business Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1545.39

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 14 / 2016

Transaction ID : A2016-2007871

Amount of Each Receipt this Period

73.59

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

157.96

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 100 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Vargo, Ronald, A, ,

Mailing Address 5272 Galloway Drive

City

Hoffman Estates

State

IL

Zip Code

60192

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

ATSV-Architect-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007934

Amount of Each Receipt this Period

16.23

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VINING, PAULA, F, ,

Mailing Address 225 GATEWOOD CIRCLE WEST

City

BURLESON

State

TX

Zip Code

76028

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

Ops Supt-Leader-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007854

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. VISCONTI, GUIDO, R, ,

Mailing Address W352 N5270 LAKE DR.

City

OCONOMOWOC

State

WI

Zip Code

53066

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

ARE-Aviation Leadership-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007748

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

56.23

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 101 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. VITALE, MICHAEL, F., Jr.

Mailing Address 1824 Roy Lane

City

Forks Twp.

State

PA

Zip Code

18040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

Encp-Regional Sales Manag

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.81

Date of Receipt

10 / 14 / 2016

Transaction ID : A2016-2007687

Amount of Each Receipt this Period

18.61

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WASHBURN, JOSEPH, M.,

Mailing Address 30 N Brainard Ave

City

LaGrange

State

IL

Zip Code

60525

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

PF-Fin Analysis-Dir

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

10 / 14 / 2016

Transaction ID : A2016-2007810

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WASINGER JR, EDWIN, L.,

Mailing Address 6245 MURIFIELD DRIVE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

CE-Strategic Int-Dir

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

444.15

Date of Receipt

10 / 14 / 2016

Transaction ID : A2016-2007811

Amount of Each Receipt this Period

21.15

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

49.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 102 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Wasserman, Robert, , ,

Mailing Address 1N165 Partridge Dr

City
Wheaton

State
IL

Zip Code
60188

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-MKTG-eBusiness & Dire

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.64

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007926

Amount of Each Receipt this Period

73.84

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WEBB, LEWIS, C, , II

Mailing Address 1444 El Pardo Dr

City
Trinity

State
FL

Zip Code
34655

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABD-Regional Financial Sa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.03

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007896

Amount of Each Receipt this Period

18.43

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WEHRLY, BRET, D, ,

Mailing Address 2079 POWHATAN TRAIL

City
RICHMOND

State
KY

Zip Code
40475

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
ABD-FSL Growth-Assoc Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

291.48

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007870

Amount of Each Receipt this Period

13.88

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

106.15

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 103 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Weiss, Mary, P, ,

Mailing Address 5209 Westwood Drive

City
Bethesda

State
MD

Zip Code
20816

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-L&R-Legislative & Regu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4096.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007954

Amount of Each Receipt this Period

195.08

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WHITE, JEROME, , ,

Mailing Address 5081 OVERLOOK DR.

City
ROSWELL

State
GA

Zip Code
30075

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Fld SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.58

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007671

Amount of Each Receipt this Period

12.98

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WHITFIELD, CYNTHIA, M, ,

Mailing Address 298 Keswick Grove Lane

City
Franklin

State
TN

Zip Code
37067

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-ABD-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2218.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007667

Amount of Each Receipt this Period

58.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

266.06

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WILCOX, JOHN, K, ,

Mailing Address 1120 JESSICA LANE

City
LIBERTYVILLE

State
IL

Zip Code
60048

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-PF-Insurance Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

997.71

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007746

Amount of Each Receipt this Period

47.51

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WILLIAMS, JEFFREY, W, ,

Mailing Address 7104 CHARDON COURT

City
CLARKSVILLE

State
MD

Zip Code
21029

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1218.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007765

Amount of Each Receipt this Period

58.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINTER, KURT, L, ,

Mailing Address 1403 N. WALNUT

City
ARLINGTON HGHTS

State
IL

Zip Code
60004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-MKTG-Regional Marketin

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

497.28

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007897

Amount of Each Receipt this Period

23.68

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

129.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 105 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Winter, Matthew, E, ,

Mailing Address 70 Ferncliff Drive

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

PRS-APL-Pres. The Allstat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3877.02

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007929

Amount of Each Receipt this Period

184.62

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WINTER, RONALD, W, ,

Mailing Address 2908 GREY HERON CT.

City

JOHNSBURG

State

IL

Zip Code

60051

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

Ops Supt-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

454.44

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007808

Amount of Each Receipt this Period

21.64

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WOIROL, ANGELA, K, ,

Mailing Address 28616 Sky Crest Dr

City

Ivanhoe

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Allstate Insurance Company

Occupation (for Individual)

ABD-Field Admin-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

919.38

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007856

Amount of Each Receipt this Period

43.78

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.04

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 106 OF 117

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WOOLWINE, DAVID, E, ,

Mailing Address 1608 W. ROSEHILL DR

City
CHICAGO

State
IL

Zip Code
60660

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
CR-Reputation-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

462.21

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007696

Amount of Each Receipt this Period

22.01

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wright, Jeffrey, S, ,

Mailing Address 1080 Winwood Dr.

City
Lake Forest

State
IL

Zip Code
60045

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
VP-ATSV-Information Secur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007915

Amount of Each Receipt this Period

39.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. YAGER, FLOYD, M, ,

Mailing Address 1610 BIRCH LANE

City
PARK RIDGE

State
IL

Zip Code
60068

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-PO-Product Line Manag

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1401.75

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007788

Amount of Each Receipt this Period

66.75

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

127.76

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. YOUNG, NOEL, C, ,

Mailing Address 10936 E. Butherus Drive

City
Scottsdale

State
AZ

Zip Code
85255

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

799.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007845

Amount of Each Receipt this Period

38.06

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZAGORSKI, MARY, E, ,

Mailing Address 2609 N PINE AVE

City

ARLINGTON HEIGHTS

State
IL

Zip Code
60004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
Encp-Operations-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007787

Amount of Each Receipt this Period

45.42

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZEMAN, ROBERT, L, ,

Mailing Address 2004 PEACHTREE LANE

City

ARLINGTON HEIGH

State
IL

Zip Code
60004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1218.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007910

Amount of Each Receipt this Period

58.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

141.48

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 OF 117

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ZIGTERMAN, PAUL, K, ,

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City
VILLA PARK

State
IL

Zip Code
60181

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.54

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007817

Amount of Each Receipt this Period

21.74

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ZIMMERMAN JR, GERALD, L, ,

Mailing Address 2584 Sutton Lane

City
AURORA

State
IL

Zip Code
60502

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1645.14

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007836

Amount of Each Receipt this Period

78.34

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ZUNIGA, CARLA, A, ,

Mailing Address 2189 N. BEAVER CREEK DRIVE

City
VERNON HILLS

State
IL

Zip Code
60061

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Allstate Insurance Company

Occupation (for Individual)
SVP-ABO-Operations Suppor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1060.08

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 14 / 2016

Transaction ID : A2016-2007872

Amount of Each Receipt this Period

50.48

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.56

TOTAL This Period (last page this line number only)..... ►

11418.23

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 109 OF 117

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Fifth Third Bank

Mailing Address 346 West Carol Lane

City
ElmhurstState
ILZip Code
60062Purpose of Disbursement
Bank Service Charge

001

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				13				2016					

FEC Identification Number

C

Transaction ID : B633328

Amount of Each Disbursement this Period

118.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

118.36

TOTAL This Period (last page this line number only)..... ►

118.36

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 110 OF 117

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Reaching For A Brighter America PAC

Mailing Address 403 A South Capitol Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	6		

FEC Identification Number

C C00487942

Transaction ID : B632843

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ryan Costello for Congress

Mailing Address 402 A South Capitol Street SE

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Costello, Ryan, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify)

State: PA

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	6		

FEC Identification Number

C C00554899

Transaction ID : B632844

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FSR PAC

Mailing Address 600 13th Street NW Suite 400

City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	7			2	0	1	6		

FEC Identification Number

C C00193177

Transaction ID : B632846

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

9000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 111 OF 117

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ACLI PAC

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		17		2016

Mailing Address 101 Constitution Ave. NW Suite 700

City
WashingtonState
DCZip Code
20001Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State:

District:

FEC Identification Number

C C00147066

Transaction ID : B632848

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5000.00

TOTAL This Period (last page this line number only)..... ►

14000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 112 OF 117

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. California Republican Party

Mailing Address 1001 K Street 4th Floor

City
SacramentoState
CAZip Code
95814Purpose of Disbursement
State Party Cmte

011

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) ▼

Not Applicable

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : B632572

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Friends for Bruce Borders

Mailing Address 7935 North State Road 59

City
JasonvilleState
INZip Code
47438Purpose of Disbursement
G-2016 State House 45 IN

011

Category/
Type

Candidate Name

Borders, Bruce, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify)

State: IN District: 45

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : B631726

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VoteCarbaugh.com

Mailing Address 1118 Skyline Pass

City
Ft. WayneState
INZip Code
46825Purpose of Disbursement
G-2016 State House 81 IN

011

Category/
Type

Candidate Name

Carbaugh, Martin, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 81

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : B631723

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2250.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 113 OF 117

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Friends of Doug Eckerty

Mailing Address PO Box 55

City
YorktownState
INZip Code
47396Purpose of Disbursement
P-2018 State Senate 26 IN

011

Category/
Type

Candidate Name

Eckerty, Doug, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 26

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : B631748

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bob Heaton for State Rep Cmte

Mailing Address P.O. Box 9629

City
Terre HauteState
INZip Code
47808Purpose of Disbursement
G-2016 State House 46 IN

011

Category/
Type

Candidate Name

Heaton, Bob, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 46

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : B631752

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Hoosiers for Holdman

Mailing Address 7617 W. Jefferson Blvd.

City
Ft. WayneState
INZip Code
46804Purpose of Disbursement
P-2018 State Senate 19 IN

011

Category/
Type

Candidate Name

Holdman, Travis, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 19

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : B631754

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1750.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 114 OF 117

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Matt Lehman for State Representative

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

Mailing Address 663 Lehman

City
BerneState
INZip Code
46711Purpose of Disbursement
G-2016 State House 79 IN

011

Candidate Name

Lehman, Matt, , ,

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: IN

District: 79

Category/
Type

FEC Identification Number

C

Transaction ID : B631751

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cmte to Elect Kevin Mahan State Representative

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

Mailing Address 305 E Fairlane Drive

City
Hartford CityState
INZip Code
47348Purpose of Disbursement
G-2016 State House 31 IN

011

Candidate Name

Mahan, Kevin, , ,

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: IN

District: 31

Category/
Type

FEC Identification Number

C

Transaction ID : B631738

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Mayfield Campaign

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

Mailing Address 50 S. Madison St.

City
MoorevilleState
INZip Code
46158Purpose of Disbursement
G-2016 State House 60 IN

011

Candidate Name

Mayfield, Peggy, , ,

Office Sought:

☒

House

☐

Senate

☐

President

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

State: IN

District: 60

Category/
Type

FEC Identification Number

C

Transaction ID : B631733

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1750.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 115 OF 117

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Torr for Representative Committee

Mailing Address 11944 Esty Way

City
CarmelState
INZip Code
46033Purpose of Disbursement
G-2016 State House 39 IN

011

Category/
Type

Candidate Name

Torr, Gerald 'Jerry', , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: IN

District: 39

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2016					

FEC Identification Number

C

Transaction ID : B631742

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Keep State Representative Jeff Greer

Mailing Address P.O. Box 1007

City
BrandenbergState
KYZip Code
40108Purpose of Disbursement
G-2016 State House 27 KY

011

Category/
Type

Candidate Name

Greer, Jeff, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: KY

District: 27

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				18				2016					

FEC Identification Number

C

Transaction ID : B633062

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Riggs for State Representative

Mailing Address P.O. Box 24586

City
LouisvilleState
KYZip Code
40224Purpose of Disbursement
G-2016 State House 31 KY

011

Category/
Type

Candidate Name

Riggs, Steve, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: KY

District: 31

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				18				2016					

FEC Identification Number

C

Transaction ID : B633065

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 116 OF 117

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Kevin Bacon

Mailing Address 260 North Cassaby Avenue

City
ColumbusState
OHZip Code
43209Purpose of Disbursement
G-2016 State Senate 3 OH

011

Category/
Type

Candidate Name

Bacon, Kevin, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

FEC Identification Number

C

Transaction ID : B629981

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Citizens for Bishoff

Mailing Address 545 E Town Street

City
ColumbusState
OHZip Code
43215Purpose of Disbursement
G-2016 State House 20 OH

011

Category/
Type

Candidate Name

Bishoff, Heather, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 20

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

FEC Identification Number

C

Transaction ID : B629984

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Citizens for Hottinger

Mailing Address 894 Johnathan Lane

City
NewarkState
OHZip Code
43055Purpose of Disbursement
G-2016 State Senate 31 OH

011

Category/
Type

Candidate Name

Hottinger, Jay, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH

District: 31

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

FEC Identification Number

C

Transaction ID : B629978

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 117 OF 117

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Citizens for Stephanie Kunze

Mailing Address 865 Macon Alley

City
ColumbusState
OHZip Code
43206Purpose of Disbursement
G-2016 State House 24 OH

011

Category/
Type

Candidate Name

Kunze, Stephanie, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

FEC Identification Number

C

Transaction ID : B629979

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LaTourette for Ohio

Mailing Address P.O. Box 76

City
Chagrin FallsState
OHZip Code
44022Purpose of Disbursement
G-2016 State House 76 OH

011

Category/
Type

Candidate Name

LaTourette, Sarah, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 76

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

FEC Identification Number

C

Transaction ID : B629983

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Mike Turzai

Mailing Address P.O. Box 721

City
WexfordState
PAZip Code
15090Purpose of Disbursement
G-2016 State House 28 PA

011

Category/
Type

Candidate Name

Turzai, Mike, , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 28

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2016

FEC Identification Number

C

Transaction ID : B629473

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1750.00

10500.00